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CONFIRMATION NO. 3008

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** CONTINUING DATA *A-T* *****

This application is a CIP of 09/640,435 08/17/2000 ABN

** FOREIGN APPLICATIONS *None* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 10	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>A-T</i> Examiner's Signature Initials				

ADDRESS

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TITLE

Matching image characteristics of stamps and personal images to aesthetically fit into a personal postal product

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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